

Application for Technology Verification

This form requests the information and commitments needed for preparing, conducting, and reporting a verification test of your technology under the EPA/ETV Advanced Monitoring Systems (AMS) Center. Please provide the information requested as fully as possible, attach supporting documentation, and return to Dr. Thomas Kelly at the address indicated below.

Thomas J. Kelly
AMS Center Verification Test Leader
Battelle
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VENDOR_____

TECHNOLOGY_____

A. Requirements for Vendors

An AMS verification test will require the following specific commitments from participating vendors:

1. Provide detailed information on your technology, including its operating requirements or limitations, description of previous testing programs, and current use of the technology. This information will be used solely to plan verification testing. Material to be treated as confidential should be marked as such.
2. Commit a person from your organizations to be Battelle's point of contact, and to lead your participation in the verification test.
3. Commit the technology, and an operator if needed, to a test of approximately one month's duration at a field site. Suitable sites will be identified based on the requirements of the technologies to be tested, in collaboration with the participating technology vendors.
4. Assist in preparing for the verification test, by providing input to the test/QA plan and approving this plan.
5. Review the draft verification report and statement.
6. Pay a fee for verification by the AMS Center. This verification fee will cover only a portion of the cost of the verification test; the remainder of the cost will be covered by EPA funding of the AMS Center.

B. General Information

1. Please provide the name, complete mailing address, phone, Fax, and email address for the following representatives of your organization:

Person authorized to commit the technology for testing:

Name_____

Title_____

Address_____

Phone_____Fax_____

Email_____

Person who will serve as the contact point and lead your participation in the verification test:

Name_____

Title_____

Address_____

Phone_____Fax_____

Email_____

Person authorized to pay the verification fee:

Name_____

Title_____

Address_____

Phone_____Fax_____

Email_____

2. Please attach a detailed description of your technology, as an aid in planning the verification test. Provide instrument manuals, operating instructions, technical

publications, schematics, drawings, photographs, or any other information you feel is pertinent to understanding the operation of your technology.

3. Please attach information on any previous evaluations of your technology. Provide copies of data or evaluation reports, or describe the testing including location, date, testing procedures, QA/QC activities, testing organization, and contact person.

C. Verification Testing

To make the verification process as effective as possible, we wish to take advantage of the experience of vendors in evaluating their technologies. The following items are intended to draw out any standard procedures, key requirements, or useful suggestions for consideration in planning the verification test. Feel free to provide any other information or materials you think may be helpful in planning the verification test.

1. Identify any standard test procedures or guidelines (e.g., ASTM, EPA, NIST) that you think should govern the testing of your technology.

2. Identify the general type of field facility (e.g., chemical plant, boiler, incinerator) that you think would be most appropriate for use as a verification testing site. You may identify specific sites if you wish, and these will be considered for use in the verification test.

3. Attach information describing the limitations or requirements of your technology in terms of field testing. What are the requirements for field setup, electrical power, other utilities, expendables, space, presence of an operator, maintenance, waste disposal, and dismantling of the setup? Are there any key characteristics required of a test site for verification testing of your technology (e.g., location, size, or physical layout of facility, nature of emission sources, species emitted)? What training is required for those operating the technology?

4. Describe the sampling and QA/QC requirements of your technology. What are the requirements for sampling duration or frequency, sample preparation or flow rate, calibration or zeroing of the technology, etc.?

5. Typically, technologies will be tested for verification of their accuracy, precision, detection limits, linearity, and data completeness, and for evaluation of operational factors such as maintenance needed and ease of use. Are there other key performance criteria specific to your technology that would be important to evaluate?

6. What parameters of your technology must be monitored during testing to assure the technology is functioning properly?

D. Testing Partners

The cost of an ETV verification test is shared by the vendor, EPA, and other partners. To the extent that other partners can provide in-kind or funding contributions to an ETV verification test, the verification fee for vendors can be reduced. Please identify any organizations that might be interested in contributing to a verification test of your company's technology.

Potential Partnering Organization_____

Point of Contact_____

Address_____

Phone_____Fax_____

Email_____

Potential Partnering Organization_____

Point of Contact_____

Address_____

Phone_____Fax_____

Email_____